

Application Data Sheet**Application Information**

**Application Type::** Regular  
**Subject Matter::** Utility  
**Suggested classification::**  
**Suggested Group Art Unit::**  
**CD-ROM or CD-R?::** None  
**Computer Readable Form (CRF)?::** No  
**Title::** TRANSMISSION FOR A REMOTE CATHETERIZATION SYSTEM  
**Attorney Docket Number::** 060541-0104  
**Request for Early Publication?::** No  
**Request for Non-Publication?::** No  
**Suggested Drawing Figure::** 1  
**Total Drawing Sheets::** 5  
**Small Entity?::** No  
**Petition included?::** No  
**Secrecy Order in Parent Appl.?::** No

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Israel  
**Status::** Full Capacity  
**Given Name::** Rafael  
**Family Name::** Beyar  
**City of Residence::** Haifa  
**Country of Residence::** Israel  
**Street of mailing address::** 16 Liberia St.  
Haifa, 34980  
**Country of mailing address::** Israel

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Israel  
**Status::** Full Capacity  
**Given Name::** Tal  
**Family Name::** Wenderow  
**City of Residence::** Haifa  
**Country of Residence::** Israel  
**Street of mailing address::** 20 Freud St.  
Haifa, 34753  
**Country of mailing address::** Israel

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Israel  
**Status::** Full Capacity  
**Given Name::** Doron  
**Family Name::** Linder  
**City of Residence::** Haifa  
**Country of Residence::** Israel  
**Street of mailing address::** 10 Mor St.  
Haifa, 34387  
**Country of mailing address::** Israel

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** Israel  
**Status::** Full Capacity  
**Given Name::** Eyal  
**Family Name::** Zilberberg  
**City of Residence::** Beit Halevi  
**Country of Residence::** Israel  
**Street of mailing address::** House 202  
Beit Halevi  
**Country of mailing address::** Israel

## **Correspondence Information**

**Correspondence Customer Number::** 26371

**E-Mail address::** PTOMailMilwaukee@foley.com

## **Representative Information**

<b>Representative Customer Number::</b>	26371	
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## **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	National Stage of	PCT/IL2005/000497	5/10/2005

## **Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>
Israel	IL162318	6/3/2004	Yes

## **Assignee Information**

### **Assignee**